Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 k if this an ided filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Robert Middle name Nance Last name and Suffix (Sr., Jr., II, III)	Lisa First name Ann Middle name Nance Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9302	xxx-xx-1526

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 2 of 57

Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	3499 County Road 64 Willow Wood, OH 45696	If Debtor 2 lives at a different address: 3492 County Road 64 Willow Wood, OH 45696			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Lawrence		Lawrence			
	County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 3 of 57 Desc Main $\frac{1}{1/12/19}$ 12:26PM Case 1:19-bk-10109

John Robert Nance Debtor 1

Deb	tor 2	Lisa Ann Nance				Case number (if known)
Part		Tell the Court About \				
7.	Bank	chapter of the ruptcy Code you are			orief description of each, see <i>Notice Required</i> go to the top of page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy riate box.
	cnoo	sing to file under	■ Chapte	er 7		
			☐ Chapte	er 11		
			☐ Chapte	er 12		
			☐ Chapte	er 13		
8. How y		you will pay the fee	abo orde a pr l ne The	ut how your or If you	ou may pay. Typically, if you are paying the fee attorney is submitting your payment on your baddress. The fee in installments. If you choose this one in Installments (Official Form 103A).	neck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with ption, sign and attach the <i>Application for Individuals to Pay</i>
			but app	is not req lies to yo	uired to, waive your fee, and may do so only it ur family size and you are unable to pay the fe	otion only if you are filing for Chapter 7. By law, a judge may, fryour income is less than 150% of the official poverty line that the in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.
9.		you filed for ruptcy within the	■ No.			
		years?	☐ Yes.			
				District	When	Case number
				District	When	Case number
				District	When	Case number
10.		iny bankruptcy	■ No			
	filed not fi you,	s pending or being by a spouse who is ling this case with or by a business er, or by an ate?	☐ Yes.			
				Debtor		Relationship to you
				District	When	Case number, if known
				Debtor		Relationship to you
				District	When	Case number, if known
11.		ou rent your	■ No.	Go to l	ine 12.	
	resid	ence?	☐ Yes.	Has yo	our landlord obtained an eviction judgment aga	ainst you?
					No. Go to line 12.	
					Yes. Fill out Initial Statement About an Eviction	on Judgment Against You (Form 101A) and file it as part of

this bankruptcy petition.

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main 12/19 12:26PM Document Page 4 of 57 John Robert Nance Debtor 1 Debtor 2 Lisa Ann Nance Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach Check the appropriate box to describe your business: it to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above Are you filing under 13. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes.

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 5 of 57

Debtor 1 John Robert Nance
Debtor 2 Lisa Ann Nance

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

Page 6 of 57 Document Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts ☐ No. I am not filing under Chapter 7. Go to line 18. 17. Are you filing under Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John Robert Nance /s/ Lisa Ann Nance John Robert Nance **Lisa Ann Nance** Signature of Debtor 1 Signature of Debtor 2

Executed on 01/12/2019

MM / DD / YYYY

Executed on 01/12/2019

MM / DD / YYYY

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 7 of 57

Debtor 1 John Robert Nance

Lisa Ann Nance

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John R. Stevenson	Date	01/12/2019
Signature of Attorney for Debtor		MM / DD / YYYY
John R. Stevenson		
Printed name		
John R. Stevenson		
Firm name		
116 Poole Street		
West Portsmouth, OH 45663		
Number, Street, City, State & ZIP Code		
Contact phone 740-858-6654	Email address	stevensonchapter7@msn.com
0023998 OH		
Bar number & State		

	Case	1:19-bk-10109	Doc 1	Filed 01/12/ Document		01/12/19 12:27:19	9 Des	sc Main 1/12/19 12:26PN
Fill	in this informa	ation to identify your o	case:					
Del	otor 1	John Robert Nand	e					
		First Name	Middle N	lame	Last Name			
	otor 2	Lisa Ann Nance						
(Spc	ouse if, filing)	First Name	Middle N	lame	Last Name			
Uni	ted States Ban	kruptcy Court for the:	SOUTHER	N DISTRICT OF OF	IIO			
Cas	se number							
(if kr	nown)			_			☐ Chec	k if this is an
							amer	nded filing
Su	mmary of					cal Information re equally responsible for		12/15 ng correct
info you	rmation. Fill or r original form		s first; then	complete the infor	mation on this form	. If you are filing amend		
								assets of what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo	orm 106A/B) om Schedule	A/B			\$	30,000.00
			-				\$	27,093.00
	1c. Copy line	63, Total of all property	on Schedule	e A/B			\$	57,093.00
Par	t 2: Summa	rize Your Liabilities						
								iabilities nt you owe
2.		Creditors Who Have Clatotal you listed in Colun				of Part 1 of Schedule D	\$	24,778.65
3.		F: Creditors Who Have to total claims from Part 1				E/F	\$	0.00
	3b. Copy the	e total claims from Part 2	2 (nonpriority	unsecured claims) f	rom line 6j of Schedu	ıle E/F	\$	31,417.43
						Your total liabilities	\$	56,196.08
Par	t 3: Summa	rize Your Income and	Expenses					
4.		Your Income (Official Formula Mined monthly income		of Schedule I			\$	2,436.51
5.		Your Expenses (Official onthly expenses from lin		edule J			\$	2,364.36
Par	t 4: Answer	These Questions for	Administrati	ve and Statistical I	Records			

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 9 of 57

Debtor 1 John Robert Nance
Debtor 2 Lisa Ann Nance

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,807.28

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,965.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	13,965.00

Cas	e 1:19-bk-101	09 Doc 1	_	ed 01/12. :ument	/19 Entered Page 10 of		/19 12:	27:19	Des	C Main 1/12/19 12:26F
Fill in this info	mation to identify y	our case and th			Faue 10 0	37				
Debtor 1	John Robert	Nance								
	First Name		Name		Last Name					
Debtor 2	Lisa Ann Nan									
Spouse, if filing)	First Name	Middle	Name		Last Name					
Jnited States B	ankruptcy Court for t	he: SOUTHER	N DIST	RICT OF OH	IIO					
Case number										Check if this is an amended filing
	orm 106A/B le A/B: Pr	onerty								10/45
	separately list and de			anhi anaa 16	an accet fite in man	- than ana	antamanı, lin	4 4ba aaaat in		12/15
Part 1: Describe	re space is needed, at stion. Each Residence, But have any legal or equ	ilding, Land, or Ot	her Real	Estate You O	lwn or Have an Interd	est In	write your r	iame and cas	e num	ber (II Known).
☐ No. Go to Pa	art 2.									
	unty Road 64 s, if available, or other descr	ription	What	Single-family Duplex or mu	ty? Check all that apply home ulti-unit building m or cooperative		the amount	of any secure	d claim	r exemptions. Put ns on <i>Schedule D:</i> cured by Property.
Willow W		45696-0000		Land	d or mobile home		Current va	perty?		rent value of the tion you own?
City	State	ZIP Code		Investment p Timeshare Other	property		Describe t	ee simple, ten		\$30,000.00 wnership interest by the entireties, or
Lawrenc	e		Who	Debtor 1 only	=	heck one	a life estat	e), if known.		
County	-			Debtor 1 and	y d Debtor 2 only of the debtors and an	other		c if this is con structions)	nmunit	y property
				r information erty identifica	you wish to add abo tion number:	ut this item	, such as lo	cal		
			only	Debtor 2,	Lisa Nance resi	des there	•			

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$30,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

Document Page 11 of 57

Debto Debto		bert Nance Nance	Cocument Page 11 01 57	Case number (if known)			
3. Ca	rs, vans, trucks,	tractors, sport utility ve	ehicles, motorcycles				
	No						
	Yes						
_	res						
3.1	Make: GMC		Who has an interest in the property? Check one	Do not deduct secured cla	ed claims on Schedule D:		
	Model: Sierra	l	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.		
	Year: 2002 Approximate milea	ge: 300k+	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?		
	Other information:	ge. <u>300k+</u>	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:		
	Curor information:		At least one of the deptors and another				
			☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00		
3.2	Make: Chev	y	Who has an interest in the property? Check one	Do not deduct secured cla			
	Model: Silver	ado	Debtor 1 only	the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property			
	Year: 2003		Debtor 2 only	Current value of the	Current value of the		
	Approximate milea	ge: 200K+	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information:		☐ At least one of the debtors and another				
			☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00		
3.3			Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:			
	Model: picku	<u>p</u>	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.		
	Year: 1995	2001/	Debtor 2 only	Current value of the	Current value of the		
	Approximate milea Other information:	ge: 300K+	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information.		☐ At least one of the debtors and another				
			☐ Check if this is community property (see instructions)	\$250.00	\$250.00		
3.4	Make: Chev	у	Who has an interest in the property? Check one	Do not deduct secured cla			
	Model: S14		Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.		
	Year: 1985		Debtor 2 only	Current value of the	Current value of the		
	Approximate milea	ge: 200K+	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information:		At least one of the debtors and another				
			Check if this is community property (see instructions)	\$250.00	\$250.00		
3.5	Make: Ford		Who has an interest in the property? Check one	Do not deduct secured cla			
	Model: Musta	ang	Debtor 1 only	Creditors Who Have Clair			
	Year: 1995		Debtor 2 only	Current value of the	Current value of the		
	Approximate milea	ge: unkn own	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?		
	Other information:		☐ At least one of the debtors and another				
	wrecked/Total	led	_	* 000 00	****		
			☐ Check if this is community property (see instructions)	\$200.00	\$200.00		

Official Form 106A/B Schedule A/B: Property page 2

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

Document Page 12 of 57

Debte Debte		John Robert Nance Lisa Ann Nance	Ca	ase number (if known)	
			ATVs and other recreational vehicles, other vehicles, and sonal watercraft, fishing vessels, snowmobiles, motorcycle a		
	No				
	Yes				
_	163				
4.1	Make:	Clayton	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Mobile Home	Debtor 1 only		laims Secured by Property.
	Year:	1999	Debtor 2 only	Current value of the	Current value of the
			■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	nformation:	At least one of the debtors and another	445 000 00	445 000 00
			Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
4.2	Make:	Yamaha	Who has an interest in the property? Check one	Do not deduct secured	claims or exemptions. Put
	Model	V6A motorcycle	Debtor 1 only		ired claims on Schedule D:
	Model: Year:	2003	Debtor 2 only		laims Secured by Property.
	ı caı.	2003	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other in	nformation:	☐ At least one of the debtors and another	p	,,
			☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
6. Ho	u sehol e kamples No	d goods and furnishings :: Major appliances, furniture Describe misc furn glasses, towels, n small me purchase items, m	e, linens, china, kitchenware niture, beds w/ bedding, lamps, shelves/bookcase dishes, small cooking utensiles/appliances, linennisc hand & small power tools, mower, clocks& or echanical devices, vacuum & cleaning supplies, for ded for home consumption, trash cans, bages & stoisc property items etc (no single piece, article or it more than \$575)	s & ther ood orage	Current value of the portion you own? Do not deduct secured claims or exemptions.
E	No	Televisions and radios; au including cell phones, car escribe	udio, video, stereo, and digital equipment; computers, printen meras, media players, games TVs \$250, misc players clocks & radios \$50, iphon Talk Plan) \$350, computer w/ accessories \$200		tions; electronic devices
E)	<i>camples</i> No	es of value : Antiques and figurines; pa other collections, memora	aintings, prints, or other artwork; books, pictures, or other art abilia, collectibles	objects; stamp, coin, or b	paseball card collections;

Official Form 106A/B Schedule A/B: Property page 3

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Page 13 of 57 Document John Robert Nance Debtor 1 Debtor 2 Case number (if known) Lisa Ann Nance books magazines family photos wall hangings pictures (Cds/dvds and misc programs/downloads are by liscence only & resalel is \$300.00 prohibited by Federal copyright law) etc 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... .12 gauge winchester pump shotgun \$400, SCY 9mm pistole \$250 \$700.00 misc ammo & accessories \$50 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$250.00 clothes and shoes (no single article valued at more than \$100) 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... wedding set \$200, walmart type watch \$5, misc costume jewelry \$230.00 \$25 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$6,330.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Yes.

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 14 of 57

Debtor 1 Debtor 2		Case number (if known)
		Cash	\$53.00
	osits of money mples: Checking, savings, or other financial acinstitutions. If you have multiple accour	counts; certificates of deposit; shares in credit unions, bro	okerage houses, and other similar
□ No ■ Ye	os	Institution name:	
	17.1.	Members Choice	\$10.00
	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with l	prokerage firms, money market accounts	
	s Institution or issue	er name:	
join	t venture	porated and unincorporated businesses, including ar	n interest in an LLC, partnership, and
■ No	oes. Give specific information about them Name of entity:	 % of ownersh	ip:
Neg		gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
■ No	os. Give specific information about them Issuer name:		
	,	403(b), thrift savings accounts, or other pension or profit	-sharing plans
	es. List each account separately. Type of account:	Institution name:	
You <i>Exa</i>	mples: Agreements with landlords, prepaid rer	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications	s companies, or others
■ No) 9S	Institution name or individual:	
23. Ann I No		ney to you, either for life or for a number of years)	
□ Ye	s Issuer name and description.		
	S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tu	ition program.
		on. Separately file the records of any interests.11 U.S.C.	§ 521(c):
25. Trus ■ No		(other than anything listed in line 1), and rights or pov	wers exercisable for your benefit
☐ Ye	es. Give specific information about them		
	ents, copyrights, trademarks, trade secrets, imples: Internet domain names, websites, proc		

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Give specific information about them...

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Page 15 of 57 Document Debtor 1 John Robert Nance Debtor 2 Case number (if known) Lisa Ann Nance 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2018 Unknown **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: Term Ins available as condition of D#2's employment, face amount D#1 \$0.00 \$10,000 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

Dobtor 1	John Robert Nance	Document	Page 16 of	57	1/12/19 12:26P
Debtor 1 Debtor 2				Case number (if known	n)
	the dollar value of all of your entries from Part 4. Write that number here				\$63.00
Part 5:	Describe Any Business-Related Property You	Own or Have an Interes	st In. List any real est	ate in Part 1.	
37. Do yo u	u own or have any legal or equitable interest	n any business-related	property?		
No. 0	Go to Part 6.				
☐ Yes.	Go to line 38.				
	Describe Any Farm- and Commercial Fishing- f you own or have an interest in farmland, list it in		wn or Have an Intere	est In.	
16. Do y o	ou own or have any legal or equitable in	terest in any farm- o	r commercial fishi	ng-related property?	
■ N	o. Go to Part 7.				
☐ Ye	es. Go to line 47.				
Part 7:	Describe All Property You Own or Have a	n Interest in That You D	Did Not List Above		
	ou have other property of any kind you on mples: Season tickets, country club member				
	s. Give specific information				
54. Add	the dollar value of all of your entries fr	om Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form				
55. Par	t 1: Total real estate, line 2				\$30,000.00
56. Par	t 2: Total vehicles, line 5	_	\$20,700.00		
57. Par	t 3: Total personal and household items	, line 15	\$6,330.00		
58. Par	t 4: Total financial assets, line 36		\$63.00		
59. Par	t 5: Total business-related property, line	÷ 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related prope	erty, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 5	i4 + _	\$0.00		

\$27,093.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 7

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$27,093.00

\$57,093.00

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

		DUGUITE	III Paue 17 UIS) <i>[</i>
Fill in this infor	mation to identify your	case:		
Debtor 1	John Robert Nan	ce		
	First Name	Middle Name	Last Name	
Debtor 2	Lisa Ann Nance			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is a
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim as	Exempt
---------	--------------	----------	--------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Check only one box for each exemption. Schedule A/B			
3492 County Road 64 Willow Wood, OH 45696 Lawrence County	\$30,000.00	\$60,000.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
only Debtor 2, Lisa Nance resides there Line from Schedule A/B: 1.1		□ 100% of fair market value, up to any applicable statutory limit	2020.00(1)(1)	
2002 GMC Sierra 300k+ miles	\$1,000.00	\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Ente from Genedate AVD. G.1		☐ 100% of fair market value, up to any applicable statutory limit	2020.00(//)(2)	
1999 Clayton Mobile Home Line from Schedule A/B: 4.1	\$15,000.00	\$30,000.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Ellic Holli Gonedale A.B. 4.1		☐ 100% of fair market value, up to any applicable statutory limit	2020.00(//)(1)	
2003 Yamaha V6A motorcycle Line from Schedule A/B: 4.2	\$1,000.00	\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Line nom Schedule AVD. 4.2		☐ 100% of fair market value, up to any applicable statutory limit	2020.00(, ,,(2)	

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Page 18 of 57 Document John Robert Nance Debtor 1 Debtor 2 Lisa Ann Nance Case number (if known) Amount of the exemption you claim Brief description of the property and line on Current value of the Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B misc furniture, beds w/ bedding, Ohio Rev. Code Ann. § \$4,000.00 \$8,000.00 lamps, shelves/bookcases, glasses, 2329.66(A)(4)(a) dishes, small cooking 100% of fair market value, up to utensiles/appliances, linens & any applicable statutory limit towels, misc hand & small power tools, mower, clocks& other small mechanical devices, vacuum & cleaning supplies, food purchased for ho Line from Schedule A/B: 6.1 two 32" TVs \$250, misc players Ohio Rev. Code Ann. § \$850.00 \$1,300.00 clocks & radios \$50, iphone 6+ 2329.66(A)(4)(a) П (straight Talk Plan) \$350, computer 100% of fair market value, up to any applicable statutory limit w/ accessories \$200 Line from Schedule A/B: 7.1 books magazines family photos wall Ohio Rev. Code Ann. § \$600.00 \$300.00 hangings pictures (Cds/dvds and 2329.66(A)(4)(a) misc programs/downloads are by 100% of fair market value, up to liscence only & resalel is prohibited any applicable statutory limit by Federal copyright law) etc Line from Schedule A/B: 8.1 .12 gauge winchester pump shotgun Ohio Rev. Code Ann. § \$1,400,00 \$700.00 2329.66(A)(4)(a) \$400, SCY 9mm pistole \$250 misc ammo & accessories \$50 100% of fair market value, up to Line from Schedule A/B: 10.1 any applicable statutory limit clothes and shoes (no single article Ohio Rev. Code Ann. § \$250.00 valued at more than \$100) 2329.66(A)(4)(a) Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit wedding set \$200, walmart type Ohio Rev. Code Ann. § \$230.00 \$1,600.00 watch \$5, misc costume jewelry \$25 2329.66(A)(4)(b) Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash Ohio Rev. Code Ann. § \$53.00 \$53.00 Line from Schedule A/B: 16.1 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit **Members Choice** Ohio Rev. Code Ann. § \$10.00 \$10.00 Line from Schedule A/B: 17.1 2329.66(A)(3)

Federal: 2018

Line from Schedule A/B: 28.1

Unknown

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100%

Ohio Rev. Code Ann. §

2329.66(A)(9)(f)

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 19 of 57

	otor 2 Lisa Ann Nance			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Term Ins available as condition of D#2's employment, face amount	\$0.00		\$10,000.00	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05
	\$10,000 Beneficiary: D#1 Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(0)(0), 3317.03
	Excess equity (if any) in residence,	Unknown		\$2,500.00	Ohio Rev. Code Ann. §
motorvehicles, tax refunds or any other article or item listed on Schedule"A/B" whose current retail fair market value is in excess of \$575 or \$1600 of one item of jewelry (if any) Line from Schedule A/B:			100% of fair market value, u any applicable statutory limit		2329.66(A)(18)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 ■ No Yes. Did you acquire the property covere □ No □ Yes	3 years after that for ca	ises fi	•	,

Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Case 1:19-bk-10109 Doc 1 Document Page 20 of 57 Fill in this information to identify your case: Debtor 1 John Robert Nance Middle Name Last Name First Name Debtor 2 Lisa Ann Nance First Nam (Spouse if, filing) Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column B Column C Column A 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. claim **Best One Auto Sales** Describe the property that secures the claim: \$4,801.65 \$3,000.00 \$1,801.65 Creditor's Name 2003 Chevy Silverado 200K+ miles As of the date you file, the claim is: Check all that 14702 State Route 93 Jackson, OH 45640 □ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only lacksquare At least one of the debtors and another ■ Judgment lien from a lawsuit ☐ Check if this claim relates to a automobile Other (including a right to offset) community debt Date debt was incurred 2018 Last 4 digits of account number 7158 **Mid Ohio Finance** Describe the property that secures the claim: \$16,684.00 \$15,000.00 \$1,684.00 Creditor's Name 1999 Clayton Mobile Home PO Box 637222 As of the date you file, the claim is: Check all that Cincinnati. OH 45263-7222 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ☐ An agreement you made (such as mortgage or secured Debtor 2 only

Official Form 106D

■ Debtor 1 and Debtor 2 only

community debt

At least one of the debtors and another

☐ Check if this claim relates to a

Date debt was incurred 2002

Mortgage

1100

☐ Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

☐ Judgment lien from a lawsuit

Other (including a right to offset)

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 21 of 57

Debtor 1 John	Robert Nan	ce			Case number (if known)		
First Nam	e	Middle Name	Last Name		_		
Debtor 2 Lisa A	nn Nance						
First Nam	е	Middle Name	Last Name				
2.3 OneMain		Describe	the property that secures the c	laim:	\$3,293.00	\$200.00	\$3,093.00
Creditor's Name		wrecke	ord Mustang unkn own n d/Totaled	niles			
15th Floor	ational Driv MD 21202		date you file, the claim is: Check	call that	I		
Number, Street,	City, State & Zip C	Code Unliqui	dated				
Who owes the de	bt? Check one.	☐ Dispute Nature of	ed f lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only			☐ An agreement you made (such as mortgage or secured car loan)				
■ Debtor 1 and De	btor 2 only	☐ Statuto	ory lien (such as tax lien, mechani	c's lien)			
☐ At least one of th	e debtors and a	another	ent lien from a lawsuit				
Check if this cla		Other ((including a right to offset)				
Date debt was incu	rred <u>2014</u>	Las	st 4 digits of account number	9260	<u> </u>		
Add the dollar va	lue of your ent	ries in Column A on	this page. Write that number h	ere:	\$24,778.65	1	
If this is the last Write that number		rm, add the dollar v	alue totals from all pages.		\$24,778.65		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

	Oddc 1:15 bk 10105	Document F	Page 22	2 of 57	_1.10 D	1/12/19 12:26PM
Fill in this	s information to identify your ca					
Debtor 1	John Robert Nance				1	
	First Name	Middle Name L	ast Name		ı	
Debtor 2 (Spouse if, fi	Lisa Ann Nance First Name	Middle Name L	ast Name		ı	
	3,				ı	
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT OF OHIC)		1	
Case nun	nber				ı	
(if known)					_	neck if this is an
					an	nended filing
Official	Form 106E/F					
Sched	ule E/F: Creditors Wh	o Have Unsecured C	laims			12/15
any execut Schedule G Schedule E left. Attach	olete and accurate as possible. Use I ory contracts or unexpired leases the S: Executory Contracts and Unexpire D: Creditors Who Have Claims Secure the Continuation Page to this page. case number (if known).	at could result in a claim. Also list of the Leases (Official Form 106G). Do red by Property. If more space is nee	executory conot include and the copy to th	ontracts on Schedule A/B: F any creditors with partially s he Part you need, fill it out, i	Property (Officia secured claims to number the enti	I Form 106A/B) and on that are listed in ries in the boxes on the
Part 1:	List All of Your PRIORITY Unse					
	y creditors have priority unsecured of	claims against you?				
	. Go to Part 2.					
☐ Ye						
	List All of Your NONPRIORITY					
3. Do an	y creditors have nonpriority unsecur	ed claims against you?				
☐ No	. You have nothing to report in this part	. Submit this form to the court with you	ır other sche	dules.		
■ Ye	S.					
unsecu	I of your nonpriority unsecured clair ured claim, list the creditor separately for ne creditor holds a particular claim, list	or each claim. For each claim listed, id	entify what ty	pe of claim it is. Do not list cla	aims already incl	uded in Part 1. If more
						Total claim
	choice Recovery	Last 4 digits of accour	nt number	10		\$1,068.00
1	onpriority Creditor's Name 550 Old Henderson Rd Ste S columbus. OH 43220	When was the debt inc	curred?	2018		
N	umber Street City State Zlp Code /ho incurred the debt? Check one.	As of the date you file,	, the claim is	s: Check all that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and anoth	er Type of NONPRIORITY	unsecured	claim:		
	Check if this claim is for a commu	nity Student loans				
	ebt		out of a separ	ration agreement or divorce th	at you did not	
	the claim subject to offset?	report as priority claims	profit chari-	g plans, and other similar debt		
	No	·		•	S	
L	Yes	Other. Specify	notny Wr	neeler MD - medical		

Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 23 of 57 Case 1:19-bk-10109

otor 2 Lisa Ann Nance	Case number (if known)		
Credit Collection Service	Last 4 digits of account number 4631		\$80.00
Nonpriority Creditor's Name PO Box 607	When was the debt incurred? 2012		
Norwood, MA 02062 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all th	nat apply	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	■ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	ent or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plans, and or	ther similar debts	
Yes	■ Other. Specify Progressive insurance	e	
Credit One Bank	Last 4 digits of account number 4796		\$687.00
Nonpriority Creditor's Name 6801 S. Cimarron Road Las Vegas, NV 89113	When was the debt incurred? 2016		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all th	at apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	ent or divorce that you did not	
■ No	\square Debts to pension or profit-sharing plans, and o	ther similar debts	
Yes	Other. Specify credit card		
Dept of Ed/Navient	Last 4 digits of account number 0151		\$1,739.00
Nonpriority Creditor's Name PO Box 9655	When was the debt incurred? 2015		
Wilkes Barre, PA 18773-9655	when was the dept incurred? 2013		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all the	at apply	
Who incurred the debt? Check one.	П		
Debtor 1 only	Contingent		
Debtor 2 only	■ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	ent or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing plans, and o	ther similar debts	
□ Yes	Other. Specify		
<u> </u>	student loan		

Debtor 1 John Robert Nance

Debto	Case 1:19-bk-10109 Doc 1	Filed 01/12/19 Ent Document Page 2		Desc Main 1/12/19 12:26P
Debto	or 2 Lisa Ann Nance		Case number (if known)	
1.5	Dept of Ed/Navient Nonpriority Creditor's Name	Last 4 digits of account number	0151	\$1,593.00
	PO Box 9655 Wilkes Barre, PA 18773-9655	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	■ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did no	t
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	ın	
4.6	Dept of Ed/Navient Nonpriority Creditor's Name	Last 4 digits of account number	0150	\$6,897.00
	PO Box 9655	When was the debt incurred?	2015	<u></u>
	Wilkes Barre, PA 18773-9655 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did no	t
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	ın	
1.7	Dept of Ed/Navient	Last 4 digits of account number	0150	\$3,736.00
	Nonpriority Creditor's Name PO Box 9655 Wilkes Borro BA 19773 9655	When was the debt incurred?	2015	_
	Wilkes Barre, PA 18773-9655 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		

■ Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another \square Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Disputed

Type of NONPRIORITY unsecured claim:

■ Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify

student loan

	Case 1:19-bk-10109 Doc 1	Document Page 25 of 57	Jesc Main 1/12/19 12:26PI
Debt Debt	or 1 John Robert Nance or 2 Lisa Ann Nance	Case number (if known)	
4.8	Diversified Consultants Inc	Last 4 digits of account number 24	\$147.00
	Nonpriority Creditor's Name 10550 Deerwood Pk Blvd Ste 708 DBA DCI	When was the debt incurred? 2018	_
	Jacksonville, FL 32256 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify ATT U Verse	_
4.9	Fingerhut/Webbank	Last 4 digits of account number 6992	\$128.00
	Nonpriority Creditor's Name 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred? 2015	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	_
4.1	First Premier Bank	Last 4 digits of account number 7800	\$465.00
0	Nonpriority Creditor's Name	Last 4 digits of account number 7800	Ψ+00.00
	3820 N. Louise Avenue Sioux Falls, SD 57107	When was the debt incurred? 2014	_
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Пол	
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Chack if this claim is for a community	☐ Student loans	

debt

■ No

☐ Yes

Other. Specify credit card

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 26 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance		Case number (if known)	
4.1	First Premier Bank	Last 4 digits of account number	0178	\$870.00
	Nonpriority Creditor's Name 3820 N. Louise Avenue Sioux Falls, SD 57107	When was the debt incurred?	2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	■ Unliquidated		
	■ Debtor 1 and Debtor 2 only	<u> </u>		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	_	Student loans	 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify _ credit card		-
4.1	Ginnys Inc - CPU	Last 4 digits of account number	5168	\$199.00
	Nonpriority Creditor's Name 1112 7th Avenue Monroe, WI 53566-1364	When was the debt incurred?	2015	-
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify credit card		-
4.1	GLA Collection Company Inc		3694	\$39.00
3	Nonpriority Creditor's Name	Last 4 digits of account number		——————————————————————————————————————
	2630 Gleeson Lane Louisville, KY 40299	When was the debt incurred?	2016	-
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify Profession		
	00	- Other. Specify	a a oo: 1:00 ::10	

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 27 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance		Case number (if known)	
4.1	GLA Collection Company Inc	Last 4 digits of account number	5842	\$153.00
	Nonpriority Creditor's Name 2630 Gleeson Lane Louisville, KY 40299	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Profession	al Path Service Inc	
4.1 5	GLA Collection Company Inc	Last 4 digits of account number	5161	\$157.00
	Nonpriority Creditor's Name 2630 Gleeson Lane Louisville, KY 40299	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Contingent			
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Riverside A	Anethesia PSC	
4.1	GLA Collections	Last 4 digits of account number	1213	\$259.00
	Nonpriority Creditor's Name PO Box 991199	When was the debt incurred?	2014	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Offect all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	■ Unliquidated□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	No		
	Yes	■ Other. Specify KDMS Ane	sthesia medical	

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 28 of 57

GLA Collections	Last 4 digits of account number 1213	\$25		
Nonpriority Creditor's Name PO Box 991199	When was the debt incurred? 2014			
Louisville, KY 40269-1199 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
Debtor 2 only	■ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t		
No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify KDMS Anesthesia medical			
King's Daughters Medical Center	Last 4 digits of account number	\$30		
Nonpriority Creditor's Name PO Box 151	When was the debt incurred? 2017			
Ashland, KY 41105-0151 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	По и			
☐ Debtor 1 only	Contingent			
Debtor 2 only	■ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
☐ Check if this claim is for a community debt				
Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did no report as priority claims	ī		
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify medical			
Merrick Bank	Last 4 digits of account number 2061	¢4.44		
Nonpriority Creditor's Name	Last 4 digits of account number 2061	\$1,11		
PO Box 9201	When was the debt incurred? 2012			
Old Bethpage, NY 11804 Number Street City State Zlp Code	As of the date you file the claim is: Cheek all that canh			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
Debtor 2 only	■ Unliquidated			
■ Debtor 1 and Debtor 2 only	□ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
-	■ Other. Specify credit card			

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 29 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance		Case number (if known)	
4.2	Merrick Bank	Last 4 digits of account number	6402	\$888.00
	Nonpriority Creditor's Name PO Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	2012	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify credit card		-
4.2	One Advantage LLC Nonpriority Creditor's Name	Last 4 digits of account number	1015	\$142.00
	7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	2017	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	• • • • • • • • • • • • • • • • • • • •	
	Yes	Other. Specify Kings Daug	ghters Medical Center - medical	-
4.2	One Advantage LLC	Last 4 digits of account number	4460	\$383.00
	Nonpriority Creditor's Name 7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	2014	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	□ Debts to pension or profit-sharin	o plans, and other similar debts	
	Yes	Other. Specify Kings Daug	ghters Medical Center - medical	_

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 30 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance		Case number (if known)	
4.2	One Advantage LLC	Last 4 digits of account number	2569	\$194.00
	Nonpriority Creditor's Name 7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	2016	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Kings Daug	hters Medical Center - medical	-
4.2	One Advantage LLC Nonpriority Creditor's Name	Last 4 digits of account number	2569	\$208.00
	7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	2016	-
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Kings Daug	ghters Medical Center - medical	-
4.2	One Advantage LLC	Last 4 digits of account number	6028	\$442.00
<u>.</u>	Nonpriority Creditor's Name 7650 Magna Drive	When was the debt incurred?	2017	
	Relleville, IL 62223 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Kings Daug	ghters Medical Center	_

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 31 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance		Case number (if known)	
4.2	One Advantage LLC	Last 4 digits of account number	6029	\$700.00
	Nonpriority Creditor's Name 7650 Magna Drive Belleville, IL 62223	When was the debt incurred?	2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Kings Daug	phters Medical Center	
4.2	OneMain Financial Services Inc	Last 4 digits of account number	C617	\$3,976.43
	Nonpriority Creditor's Name PO Box 3251 Evansville, IN 47731	When was the debt incurred?	2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Springleaf	Funding Trust	
4.2	Our Lady of Bellefonte Hospital	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name 1000 St. Christopher Drive	When was the debt incurred?	2017	
	Ashland, KY 41101 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	, ,	,	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical	5,	
	— 100	Utner. Specify		

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 32 of 57

Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance Case number (if known) 4.2 **Portfolio Recovery** 7805 \$585.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 120 Corporate Boulevard Suite 100 When was the debt incurred? 2016 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify collection ☐ Yes 4.3 Portfolio Recovery 4982 \$637.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 120 Corporate Boulevard Suite 100 2016 When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Capital One Bank USA NA ☐ Yes 4.3 Republic Bank/Build 0162 \$763.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9203 When was the debt incurred? 2017 Old Bethpage, NY 11804 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 33 of 57

Debtor Debtor	1 John Robert Nance 2 Lisa Ann Nance	Case number (if known)	
4.3	SIMM Associates	Last 4 digits of account number 1095	\$763.00
	Nonpriority Creditor's Name 900 Pencade Drive Newark, DE 19702	When was the debt incurred? 2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Republic Build	
4.3	St. Mary's Medical Center	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name PO Box 630904 Cincinnati, OH 45263-0904	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.3	Swiss Colony	Last 4 digits of account number 5168	\$154.00
	Nonpriority Creditor's Name 1112 7th Avenue	When was the debt incurred? 2012	
	Monroe, WI 53566-1364 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card Other. Specify credit card	
	_ 100	- Other. Specify	

Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Case 1:19-bk-10109 Doc 1

Document Page 34 of 57

Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance Case number (if known) 4.3 The Bank of Missouri 5731 \$494.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 216 West 2nd Street 2016 When was the debt incurred? **Dixon, MO 65459** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify credit card

Add the Amounts for Each Type of Unsecured Claim

☐ Yes

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				To	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.		otal Claim
Total	OI.	Student loans	OI.	\$	13,965.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,452.43
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	31,417.43

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

		DOGUIIIE	<u>:::: Paue 33 01 37</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	John Robert Nan	ce		
	First Name	Middle Name	Last Name	
Debtor 2	Lisa Ann Nance			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	City		Olulo	Zii Oodo	
0	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

		Docume	nt Page 36 d	of 57 1/12/19 12:26
Fill in this	information to identify your			
Debtor 1	John Robert Nan	20		
DCDIOI 1	First Name	Middle Name	Last Name	
Debtor 2	Lisa Ann Nance			
(Spouse if, filin		Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Officed Stat	les bankruptey court for the.	300THERN DISTRICT	OI OI IIO	
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official	l Form 106H			
Sched	ule H: Your Cod	ebtors		12/15
501104	<u> </u>			12/13
•	and case number (if known) you have any codebtors? (If			as a codebtor.
Arizona No.	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. . Did your spouse, former spor	Nevada, New Mexico, Pud	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form 1 out Co	2 again as a codebtor only i	f that person is a guarant Form 106E/F), or Schedu	or or cosigner. Make	r if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to file Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D. line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
_				
	Number Street	O	710.0	
(City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
_	N 1 2 2 2			
	Number Street City	State	ZIP Code	
,	on,	Jaio	Zii Coue	

Fill	in this information to identify your o	ase:				l				
	otor 1 John Rober									
	otor 2 Lisa Ann Na	ance			_					
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	T OF OHIO							
	se number 							ed filing ent sho	wing postpetition	chapter
O ⁻	fficial Form 106I						MM / DD/ \		e following date:	
	chedule I: Your Inc	ome					י /טט / ואוואו	7 7 7 7		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	i are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your th you, do not inclu	spouse i	s liv nati	ing witl on abou	h you, incl ut your spe	ude inf ouse. If	ormation about more space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed			■ Employed				
		Employment status	■ Not employed				☐ Not e	mploye	d	
		Occupation	disabled				central	suppl	y-CMT	
	Include part-time, seasonal, or self-employed work.	Employer's name					Oakmo	nt Mai	nor	
	Occupation may include student or homemaker, if it applies.							1100 Grandview Drive Flatwoods, KY 41139		
		How long employed t	here?					l5 yea	rs	
Esti spou	deductions) If not naid monthly	ore than one employer, contains form.	ombine the information			oyers fo		on on th	•	
3.	deductions). If not paid monthly, Estimate and list monthly over		y wage would be.	3.	+\$		0.00	\$ +\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	2,210.48	

Copy line 4 here	Debi	tor 1 tor 2	John Robert Nance Lisa Ann Nance	_		Case	number (if i	known)	_			
Sea. Tax, Medicare, and Social Security deductions 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Social Security Social Security deductions 5c. Notificare depayments of retirement fund loans 5c. Social Social Social Social Security Social						For	Debtor 1					
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for featurement fund loans 5d. Required repayments of retirement fund loans 5d. Social Security 5c. No.00 \$ 0.000 5c. No.00 \$		Cop	by line 4 here	4.		\$_		0.00	_		•	_
S.b. Mandatory contributions for retirement plans S.c. S. 0.00 \$ 0.00	5.	List	all payroll deductions:									
5.5. Mandatory contributions for retirement plans 5.6. Voluntary contributions for retirement plans 5.7. Voluntary contributions for retirement plans 5.8. Voluntary contributions for retirement plans 5.9. Required repayments of retirement fund loans 5.0. Required repayments of retirement fund loans 5.0. Required repayments of retirement fund loans 5.0. Domestic support obligations 5.0. Domestic support obligations 5.0. Domestic support obligations 5.0. Union dues 5.0. Unio		5a.	Tax, Medicare, and Social Security deductions	58	а.	\$		0.00	q	\$	393.97	,
56. Required repayments of retirement fund loans 56. Insurance 57. Domestic support obligations 57. Domestic support obligations 58. \$ 0.000 \$ 0.000 59. Union dues 59. \$ 0.000 \$ 0.000 50. Union dues 50. Other deductions. Specify: 50. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 60. \$ 0.000 \$ 3393.97 70. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.000 \$ 1,816.51 List all other income regularly received: 8a. Net income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Unemployment compensation 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g.		5b.	•			\$_			9	\$		_
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5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$0.00 \$333.97 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$1,816.51 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation 8e. Social Security 8l. Other government assistance that you regularly receive include cash assistance had volue (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. 90.00 \$0.00 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9g. \$620.00 \$0.00 9g. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9g. \$620.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that ar		5e.	Insurance	56	Э.	\$_		0.00	9	\$	0.00	1
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 393,97 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 1,816.51 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. \$ 0.00 \$ 0.00 8g. \$ 620.00 \$ 0.00 8h. Other government assistance that you regularly receive include cash assistance and the value (if (known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. \$ 620.00 \$ 0.00 11. \$ 620.00 \$ 0.00 11. \$ 620.00 \$ 0.00 12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. On other friends or relatives. 13. Do you expect an increase or decrease within the year after you file this form? 14. Combined monthly incomes.		5f.	Domestic support obligations	5f		\$		0.00	9	\$	0.00	1
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 1,816.51 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. \$ 620.00 \$ 0.00 11. ★\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Carolinated monthly income. 13. Do you expect an increase or decrease within the year after you file this form? 14. Combined monthly income.		5g.	Union dues	50	g.	\$		0.00	9	\$	0.00	
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8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 10th government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 620.00 \$ 0.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. ★\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it papers. Programs of the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it Combined monthly income. 11. No.	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8:	a	-		0.00	•	•	0.00	_
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8e. \$620.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 \$0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$620.00 \$0.00 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		Ωh				· —						_
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 \$0.00 9. Add all other income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$620.00 \$0.00 10. \$620.00 \$0.00 11. \$620.00 \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$2,436.51 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form?			Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce	t		·_			. '	*		_
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		8d.	Unemployment compensation	80	d.	\$_		0.00	9	\$	0.00	_
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		8e.	Social Security	86	Э.	\$			9	\$		_
8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00			Include cash assistance and the value (if known) of any non-cash assistanc that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		· —				·		_
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 620.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,436.51 Combined monthly income No.		-	Other menth by income Creatiful			· -			. '	*		_
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies 12. Combined monthly income No.		OII.	Other monthly income. Specify.	01	1.+	Φ_		0.00	. + 4	Ď	0.00	_
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,436.51 Combined monthly income No.	9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	62	20.00	\$	ß	0.0	0
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,436.51 Combined monthly income No.	10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		620.00	1+ \$		1.816.51	= \$	2.436.51
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 2,436.51 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.					-		0_0.00	d L			1 L`-	
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{2,436.51}{Combined monthly income}}\$ 13. Do you expect an increase or decrease within the year after you file this form? No.	11.	Incl othe Do	ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	r dep					,	in <i>Schedu</i>	_	0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No. monthly income	12.	Wri	te that amount on the Summary of Schedules and Statistical Summary of Certa							it		
_ :	13.	Do		n?								
		_										

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 39 of 57 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Notice 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 Enter

					-1		
Fill in this informa	ation to identify yo	our case:					
Debtor 1	John Robert	t Nance			Ch	eck if this is:	
						An amended filing	
Debtor 2	Lisa Ann Na	nce					wing postpetition chapter
(Spouse, if filing)						13 expenses as or	the following date:
United States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			MM / DD / YYYY	
Case number							
(If known)							
Official Fo	orm 106J						
	J: Your	Evnor	1606				12/1:
			ISCS If two married people ar	a filing tagathar b	oth are ee	uually rosponsible fe	
	nore space is ne	eded, atta	ch another sheet to this				
Part 1: Desc	ribe Your House	ehold					
1. Is this a joi	nt case?						
☐ No. Go t	o line 2.						
■ Yes. Do	es Debtor 2 live	in a separ	ate household?				
■ N	No						
	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2.	
2. Do you hav	e dependents?	■ No					
Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relate Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not state	e the						□ No
dependents							☐ Yes
							□ No
							☐ Yes
							□ No
				-			☐ Yes
							□ No □ Yes
3. Do your ex	penses include	_	No				□ res
expenses of	of people other t	han 🗖	Yes				
yourself an	d your depende	:nts? □	165				
Part 2: Estin	nate Your Ongoi	ing Monthi	y Expenses				
	a date after the		uptcy filing date unless y y is filed. If this is a supp				
Include evacue	as maid for with	nan aaab	and the second s	f van Imani			
			government assistance it sluded it on <i>Schedule I:</i> Y				
(Official Form 1	06I.)					Your exp	enses
	_						
	or home owners nd any rent for th		ses for your residence. In rot.	nclude first mortgage	e 4.	\$	463.36
. ,	ded in line 4:	o g. o a a o					
						•	
	estate taxes	e or rontor	'e incurance		4a. 4b.	·	0.00
	erty, homeowner's e maintenance, re		s insurance ipkeep expenses		40. 4c.		0.00 0.00
	eowner's associa	•			4d.	·	0.00
			our residence, such as ho	me equity loans	5.	·	0.00

Debtor 1			bert Nance			
Debt	or 2	Lisa Anr	n Nance	Case num	ber (if known)	
_	1 14:1:4					
6.	Utilit 6a.		, heat, natural gas	6a.	\$	250.00
	6b.	-	wer, garbage collection	6b.	·	50.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
	6d.		ecify: internet	6d.	·	161.00
7.			ekeeping supplies	ou. 7.	\$	
			children's education costs	8.	\$	200.00
	-		lry, and dry cleaning	9.	\$	0.00
		•		_	\$	140.00
		•	products and services	10.	· :	70.00
			ntal expenses	11.	\$	180.00
12.			Include gas, maintenance, bus or train fare. ar payments.	12.	\$	200.00
13			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			ributions and religious donations	14.	\$	0.00
		rance.	in battorio ana rengious uchations	17.	Ψ	0.00
			nsurance deducted from your pay or included in lines 4 or 20.			
		Life insura	, , ,	15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle in:	surance	15c.	\$	350.00
			urance. Specify:	15d.	·	0.00
16.			nclude taxes deducted from your pay or included in lines 4 or 2		·	0.00
	Spec		iolado taxos doddotod from your pay or moradod in inico 1 or 2	16.	\$	0.00
17.	Insta	allment or le	ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	\$	150.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
	17d.	Other. Spe	ecify:	17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did not re	port as	·	
	dedu	icted from	your pay on line 5, Schedule I, Your Income (Official Form	106I). 18.	\$	0.00
19.	Othe	er payments	s you make to support others who do not live with you.		\$	0.00
	Spec	,		19.		
			erty expenses not included in lines 4 or 5 of this form or o			
			s on other property	20a.	·	0.00
		Real estat		20b.	·	0.00
			homeowner's, or renter's insurance	20c.	·	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
22	Calc	ulate vour	monthly expenses			
ZZ .			through 21.		\$	2,364.36
			2 (monthly expenses for Debtor 2), if any, from Official Form 1	06 1-2	\$	2,304.30
				003-2		
	22C.	Add line 22	a and 22b. The result is your monthly expenses.		\$	2,364.36
23.	Calc	ulate your	monthly net income.			
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,436.51
			r monthly expenses from line 22c above.	23b.	-\$	2,364.36
		.,,	, ,			_,;:::::::
	23c.	Subtract y	our monthly expenses from your monthly income.			70.45
		The result	t is your monthly net income.	23c.	\$	72.15
. .	_					
24.			an increase or decrease in your expenses within the year			o or doorooo boos as of a
			ou expect to finish paying for your car loan within the year or do you exp terms of your mortgage?	bect your mortgage	payment to increas	e or decrease because or a
	■ No		,			
			Explain hora:			
	□ Ye	es.	Explain here:			

No.	
☐ Yes.	Explain here:

Fill in this i	nformation to identify your	case:			
Debtor 1	John Pohert Nand	20			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2	Lisa Ann Nance				
(Spouse if, filing	First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO		
Case number	er				
(if known)					an
Declar f two marrie You must fil botaining m	Lisa Ann Nance First Name Middle Name Last Name tes Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO				
Did yo	u pay or agree to pay some	one who is NOT an atto	rney to help you fill out bank	cruptcy forms?	
■ N	0				
□ Y	es. Name of person				
that the	ey are true and correct.	that I have read the sur	•		
_			ŭ		
Dai	<u> </u>		Date	V 1 V	

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 42 of 57

Fill	in this inforr	nation to identify you	r case:							
	tor 1	John Robert Na								
DCD	tor r	First Name	Middle Name	Last Name						
Deb	tor 2	Lisa Ann Nance								
(Spot	use if, filing)	First Name	Middle Name	Last Name						
Unit	ed States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO						
Cas	e number									
(if kno	_					theck if this is an mended filing				
○ tt	::-:-! -	407								
	<u>ficial Fo</u> stement	-	Affairs for Individ	duals Filing for B	ankruptcy	4/16				
					<u> </u>					
					equally responsible for supply additional pages, write you					
		n). Answer every ques								
Part	Give D	Details About Your Ma	arital Status and Where You	ı Lived Before						
		r current marital statu								
••	Wilat 15 you	ourrent maritar state								
	■ Married□ Not mar	ried								
			lived anywhere other than	where you live now?						
	During the h									
	No									
	☐ Yes. Lis	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3.	Within the la	ast 8 years, did you ev	ver live with a spouse or le	gal equivalent in a commun	ity property state or territory	? (Community property				
state	s and territor	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	isconsin.)				
	■ No									
	_	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).						
Part	Explai	n the Sources of You	r Income							
	Fill in the total	al amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ıdar years?				
	□ Na									
	□ No ■ Voc Fil	l in the details.								
	■ 162. FII	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$1,055.57				
			☐ Operating a business		☐ Operating a business					
			- 1 3							

Official Form 107

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 43 of 57

John Robert Nance Debtor 1 Debtor 2 Lisa Ann Nance Case number (if known Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 \$27,409.94 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$26.692.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security** \$862.00 the date you filed for bankruptcy: **Benefits** For last calendar year: Social Security \$7,440.00 (January 1 to December 31, 2018) benefits/Pension For the calendar year before that: Social Security \$7.440.00 (January 1 to December 31, 2017) **Benefits** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment

Was this payment for ...

Total amount

paid

Amount you

still owe

Creditor's Name and Address

Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 44 of 57 Case 1:19-bk-10109

Debtor 1 John Robert Nance Lisa Ann Nance		Cas	se number (if known)		
Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
Mid Ohio Finance PO Box 637222 Cincinnati, OH 45263-7222	Dec 2018- Jan 2019	\$1,200.00	\$16,684.00	■ Mortgage □ Car □ Credit Car □ Loan Repa □ Suppliers o ■ Other_mo	ayment or vendors
Within 1 year before you filed for bankr Insiders include your relatives; any genera of which you are an officer, director, perso a business you operate as a sole proprieto alimony.	al partners; relatives of any gen in control, or owner of 20%	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one for
NoYes. List all payments to an insider.					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
☐ Yes. List all payments to an insider Insider's Name and Address art 4: Identify Legal Actions Reposses	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes.	uptcy, were you a party in a				
Yes. Fill in the details.					
Case title Case number	Nature of the case	Court or agency		Status of the	case
Onemain Financial Services Inc v. Lisa and John Nance 18-OC-617	collection of debt	Lawrence Cou Pleas Court 111 S. 4th Stre Ironton, OH 45	et #11	■ Pending □ On appea □ Conclude	
 Within 1 year before you filed for bankr Check all that apply and fill in the details b No. Go to line 11. Yes. Fill in the information below. 		erty repossessed, 1	oreclosed, garnis	shed, attached,	seized, or levied?
Creditor Name and Address	Describe the Property		Date		Value of the
	Explain what happene	d			propert
 Within 90 days before you filed for bank accounts or refuse to make a payment No Yes. Fill in the details. 		cluding a bank or fi	nancial institutior	n, set off any an	nounts from your
Creditor Name and Address	Describe the action th	e creditor took	Date	action was	Amoun

taken

Case 1:19-bk-10109 Filed 01/12/19 Entered 01/12/19 12:27:19 Doc 1 Desc Main Page 45 of 57 Document Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was made

Email or website address Person Who Made the Payment, if Not You John R. Stevenson, Attorney at Law 116 Poole ST West Portsmouth, OH 45663 stevensonchapter7@msn.com

payment

Attorney Fees

11/30/2018

\$415.00

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 46 of 57

Debtor 1 John Robert Nance
Debtor 2 Lisa Ann Nance

Case number (if known)

17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and variansferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already	siness or financial affa le as security (such as t	airs? the granting of a s					
	■ No □ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer			any property or s received or debts schange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No							
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the prop	erty transferi	red	Date Transfer was made		
Par	8: List of Certain Financial Accounts, Insti	ruments, Safe Deposi	t Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificates	of deposit; sl		, ,		
	Yes. Fill in the details.							
		act 4 digits of account number	Type of accou instrument	clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your	home within 1	year before y	ou filed for bankruptc	y?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 47 of 57

Debtor 1 John Robert Nance
Debtor 2 Lisa Ann Nance

Case number (if known)

Par	t 9: Identify Property You Hold or Control for S	Someone Else						
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	rty you borrowed from, are storing fo	or, or hold in trust				
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, groun	• • • •					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s	mental law defines as a hazardous	s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	ny of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity	, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Case 1:19-bk-10109 Doc 1 Document Page 48 of 57 Debtor 1 John Robert Nance Debtor 2 Lisa Ann Nance Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John Robert Nance /s/ Lisa Ann Nance **Lisa Ann Nance** John Robert Nance Signature of Debtor 1 Signature of Debtor 2 Date Date 01/12/2019 01/12/2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main

Document Page 49 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In	ro	John Robert Nand	ce		Case No.			
111	-	Lisa Ann Nance		Debtor(s)	Chapter	7		
		DISCI	OSLIDE OF CON	ADENICATION OF ATTOR	NEV EAD DE	PDTOD(C)		
				MPENSATION OF ATTOR		• •		
1.	con	npensation paid to me	within one year before t	 2016(b), I certify that I am the attorn he filing of the petition in bankruptcy, lation of or in connection with the banl 	or agreed to be paid	to me, for services rendered	or to	
		For legal services, I	have agreed to accept		\$	415.00		
		Prior to the filing of	this statement I have rec	eived	\$	415.00		
		Balance Due			\$	0.00		
2.	The	e source of the comper	nsation paid to me was:					
		■ Debtor □	Other (specify):					
3.	The	e source of compensat	ion to be paid to me is:					
		■ Debtor □	Other (specify):					
4.		I have not agreed to s	share the above-disclosed	d compensation with any other person	unless they are mem	pers and associates of my law	/ firm.	
				mpensation with a person or persons w the names of the people sharing in the			. A	
5.	In	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	b. c.	Preparation and filing Representation of the [Other provisions as n Negotiations	of any petition, schedule debtor at the meeting of needed]	d rendering advice to the debtor in dete es, statement of affairs and plan which creditors and confirmation hearing, an rs to reduce to market value; exe ginal to Debtors	may be required; d any adjourned hea	rings thereof;	Doc	
6.	Ву			osed fee does not include the following ny post filing matter whasoever	service:			
				CERTIFICATION				
this		ertify that the foregoing kruptcy proceeding.	g is a complete statemen	t of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s)	in	
	01/1	2/2019		/s/ John R. Stever	nson			
	Date	?		John R. Stevenso				
				Signature of Attorne John R. Stevenso				
				116 Poole Street	/11			
				West Portsmouth	, OH 45663			
				740-858-6654 Fa				

stevensonchapter7@msn.com

Name of law firm

Fill in this inforr	mation to identify your case:	Check one box only as directed in this form and in Form	
Debtor 1	John Robert Nance	122A-1Supp:	
Debtor 2 (Spouse, if filing)	Lisa Ann Nance	■ 1. There is no presumption of abuse	
	Bankruptcy Court for the: Southern District of Ohio	☐ 2. The calculation to determine if a presumption of about applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).	
(if known)		☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.	
		☐ Check if this is an amended filing	
Official F	orm 122A - 1		
Chapter	7 Statement of Your Current Montl	nly Income	2/1
ittach a separate ase number (if k	e sheet to this form. Include the line number to which the additional in known). If you believe that you are exempted from a presumption of a	th are equally responsible for being accurate. If more space is needed, iformation applies. On the top of any additional pages, write your name buse because you do not have primarily consumer debts or because of on of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.	
Part 1: Ca	Iculate Your Current Monthly Income		
1. What is y	our marital and filing status? Check one only.		
☐ Not ma	arried. Fill out Column A, lines 2-11.		
■ Marrie	ed and your spouse is filing with you. Fill out both Columns A a	nd B. lines 2-11.	

☐ Married and your spouse is NOT filing with you. You and your spouse are:

☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Column Debtor		Debt	mn B or 2 or filing spouse
 Your gross wages, salary, tips, bonuses, overtime, a payroll deductions). 	nd co	mmissio	ons (before all	\$	0.00	\$	1,807.28
 Alimony and maintenance payments. Do not include p Column B is filled in. 	oayme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3.	Includ your ouse o	le regular depende only if Col	contributions nts, parents,	\$	0.00	\$	0.00
. Net income from operating a business, profession, o	or farr		otor 1				
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or farm	า \$	0.00	Copy here ->	\$	0.00	\$	0.00
. Net income from rental and other real property							
	•		tor 1				
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$	0.00
. Interest, dividends, and royalties				\$	0.00	\$	0.00

Case 1:19-bk-10109 Doc 1 Filed 01/12/19 Entered 01/12/19 12:27:19 Desc Main Document Page 51 of 57

or 2 <u>L</u>	isa Ann Nance			Case number	er (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 o	or	
Unem	ployment compensation			\$	0.00	\$	0.00	
the So	t enter the amount if you contend that the amount cial Security Act. Instead, list it here:		efit under					
For	you \$	0	.00					
For	your spouse \$	0	.00					
Pension benefit	on or retirement income. Do not include any am t under the Social Security Act.	nount received that w		\$	0.00	\$	0.00	
Do not receive	te from all other sources not listed above. Spe t include any benefits received under the Social S ed as a victim of a war crime, a crime against hun stic terrorism. If necessary, list other sources on a elow.	Security Act or payme manity, or internation	nts al or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	late your total current monthly income. Add lin column. Then add the total for Column A to the total		\$	0.00	+ \$ _	1,807.28	= \$Total incon	1,807.28
2:	Determine Whether the Means Test Applies to	o You					IIICOII	ie
120 0								
M 12b. T	Copy your total current monthly income from line 1 fultiply by 12 (the number of months in a year) The result is your annual income for this part of the	e form		Сор	y line 11	here=>	\$ x b. \$	12
M 12b. T	fultiply by 12 (the number of months in a year)	e form you. Follow these ste		Сор	y line 11		x	12
M 12b. Ti Calcul	fultiply by 12 (the number of months in a year) the result is your annual income for this part of the	e form		Сор	y line 11		x	12
M 12b. Tl Calcul Fill in t	Multiply by 12 (the number of months in a year) The result is your annual income for this part of the	e form you. Follow these ste		Сор	y line 11		x	1,807.28 12 21,687.36
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John Robert Nance

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Best One Auto Sales 14702 State Route 93 Jackson, OH 45640

Choice Recovery 1550 Old Henderson Rd Ste S Columbus, OH 43220

Credit Collection Service PO Box 607 Norwood, MA 02062

Credit One Bank 6801 S. Cimarron Road Las Vegas, NV 89113

Dept of Ed/Navient PO Box 9655 Wilkes Barre, PA 18773-9655

Diversified Consultants Inc 10550 Deerwood Pk Blvd Ste 708 DBA DCI Jacksonville, FL 32256

Fingerhut/Webbank 6250 Ridgewood Road Saint Cloud, MN 56303

First Premier Bank 3820 N. Louise Avenue Sioux Falls, SD 57107

Ginnys Inc - CPU 1112 7th Avenue Monroe, WI 53566-1364

GLA Collection Company Inc 2630 Gleeson Lane Louisville, KY 40299

GLA Collections PO Box 991199 Louisville, KY 40269-1199

King's Daughters Medical Center
PO Box 151
Ashland, KY 41105-0151

Merrick Bank PO Box 9201 Old Bethpage, NY 11804 Mid Ohio Finance PO Box 637222 Cincinnati, OH 45263-7222

One Advantage LLC 7650 Magna Drive Belleville, IL 62223

OneMain 100 International Drive 15th Floor Baltimore, MD 21202

OneMain Financial Services Inc PO Box 3251 Evansville, IN 47731

Our Lady of Bellefonte Hospital 1000 St. Christopher Drive Ashland, KY 41101

Portfolio Recovery 120 Corporate Boulevard Suite 100 Norfolk, VA 23502

Republic Bank/Build PO Box 9203 Old Bethpage, NY 11804

SIMM Associates 900 Pencade Drive Newark, DE 19702

St. Mary's Medical Center PO Box 630904 Cincinnati, OH 45263-0904

Stephen D. Miles 18 W. Monument Avenue Dayton, OH 45402

Swiss Colony 1112 7th Avenue Monroe, WI 53566-1364

The Bank of Missouri 216 West 2nd Street Dixon, MO 65459